

**CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)**Applicant(s): **Kevin A. Seiling**

Docket No.

**01-180**

Application No.

**10/001,730**

Filing Date

**November 2, 2001**

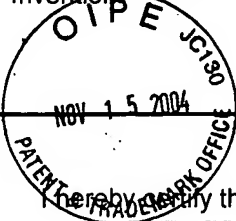
Examiner

**Kuhns, Allan R.**

Customer No.

**30058**

Group Art Unit

**1732**Invention: **A Composition for Making Extruded Shapes and a Method for Making Such Composition**

I hereby certify that the following correspondence:

**1 Response to Official Action (17 pages); 1 Transmittal Form (1 pg); 1 Fee Transmittal (1 pg); 1 Petition for Extension (1 pg) in duplicate; 1 PTO Form 1449 with references cited (130 pgs); 1 \$110 check; 1 return receipt card***(Identify type of correspondence)*

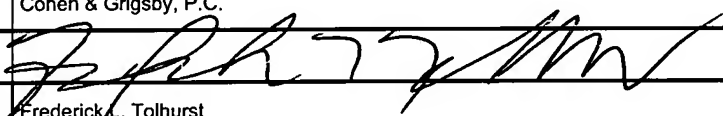
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/001,730
	Filing Date	November 2, 2001
	First Named Inventor	Kevin A. Seiling
	Art Unit	1732
	Examiner Name	Kuhns, Allan R.
	Attorney Docket Number	01-180
Total Number of Pages in This Submission		152

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Cohen & Grigsby, P.C.		
Signature			
Printed name	Frederick L. Tolhurst		
Date	November 15, 2004	Reg. No.	28,123

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